

Retail Food Inspection Report

Floyd County Health Department

Telephone (812) 948-4726

Establishment Name HAMPTON INN	Telephone Number Est 812-945-2771 Own 812-945-2771	Date of Inspection 03/28/2022	ID#
Address 411 WEST SPRING STREET, NEW ALBANY IN 47150			
Owner NEW ALBANY HOSPITALITY	Purpose <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list)	Follow Up	Released 03/28/2022
Owner's Address 411 W. SPRING ST. NEW ALBANY, IN 47150-		Menu Type 1 _ 2 <u>X</u> 3 _ 4 _ 5 _	
Person in Charge CARLOTTA LYNCH			
Responsible Person's Email CARLOTTA.LYNCH@GHS-HOTELS.COM			
Certified Food Handler JUDY HOLEBROOK			

CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"
VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE COLUMN MARKED AS "R"

Section #	C	NC	R	Narrative	To Be Corrected
294	X			Observed container of sanitizer hooked up to dispenser to be empty. Measure concentration at 0 ppm	Today
345	X			Observed ice dumped in handwashing sink. This sink should be for handwashing only.	1 day
438	X			Observed 3 spray bottles not labeled.	Today
177		X		Observed wire storage rack containing cereal to not be 6 inches off the floor.	3 days
291		X		Observed no test strips for quat sanitizer.	3 days
324		X		Observed emergency eye was station/sink to have its plumbing turned off.	1 week
355		X		When asking about how mop water is disposed it was discover it was being disposed of outside. It should be disposed of in the mop sink.	1 day

Summary of Violations C 3 NC 4 R 0

Received by (name and title printed):	Inspected by (name and title printed): Thomas Snider CFS	
Received by (signature):	Inspected by (signature): <i>Thomas Snider</i>	
cc:	cc:	cc: